

#151D
7/10/02

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In The Application of:
Gary Duffin et al.

ART UNIT: 1741

SERIAL NO.: 09/696,854
CONFIRMATION NO.: 2812

EXAMINER: FOELAK, M

FILED: APRIL 24, 2002

ATTORNEY DOCKET:
OB007ML-1

FOR: Expandable Compositions and Methods
For Making and Using the Compositions

DATE: July 05, 2002
MOBERLY, MISSOURI

FAX RECEIVED
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GROUP 1700

AMENDMENT AND REQUEST FOR RECONSIDERATION

Assistant Commissioner of Patents and Trademarks
Washington, D.C. 20231

Official

Sir:

In response to the Office Action mailed on May 09, 2002, please substitute the following amended claims for the pending claims having the same number. This amendment includes a response to a rejection under 35 U.S.C. 101 and 112. Please also find enclosed herewith a Version With Markings To Show Changes Made.

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/646,854
Filing Date	10/26/00
First Named Inventor	DUFFIN
Group Art Unit	1741
Examiner Name	FUELA
Attorney Docket Number	03 007 ML - 1

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input type="checkbox"/> For Transmittal Form <input type="checkbox"/> For Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): CERT OF FAX TRANS
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Remarks

CONF. No 2812

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT **GROUP 1700**

Print or Individual name	MICHAEL K. BOYER
Signature	<i>Michael Boyer</i>
Date	05 JUL 2002

CERTIFICATE OF MAILING

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